

DEPARTMENT OF GENERAL SERVICES
RECORDS MANAGEMENT DIVISION
RECORDS RETENTION AND DISPOSAL SCHEDULE

Schedule No. 1624

Page 1 of 1

Agency **Department of Health and Mental Hygiene
Medical Care Finance and Compliance Administration** Division/Unit **Division of Medical Assistance Recoveries Executive Section**

| Item No. | Description | Retention |
|----------|---|---|
| 1. | <u>Files of former employees of the Medical Assistance Recoveries Unit</u> Files include work history for the duration of employment within the Medical Assistance Recoveries Unit. Contents would include effective starting date, annual evaluations, disciplinary actions, reclassifications, sick leave documentation, and any other miscellaneous filing. | Retain in office for two (2) years, then transfer to the State Records Center for four (4) years and destroy. |
| 2. | <u>Timesheets</u> Folders include copies of bi-weekly timesheets. | same as above. |
| 3. | <u>Chronological files of the activities of the Division of Medical Assistance Recoveries</u> Files include documentation of the work performed in the case areas of the three sections comprising DMAR. | Retain in office for five (5) years, then transfer to the State Records Center for four (4) years and destroy. |
| 4. | <u>Health Management Systems Contract</u> Files include activities of the TPL Contractor, Health Management Systems, Inc. | Retain in office for six (6) months after contract terminates, then transfer to State Records Center for 5 years and destroy. |
| 5. | <u>Miscellaneous</u> Consists of anything not mentioned or described in items one through four above. | Retain in office for five (5) years, then transfer to the State Records Center for four (4) years and destroy. |

Schedule Approved by Department, Agency, or Division Representative.

Date

Signature

Typed Name

Title

Greta E. Rolland
Chief - 225-1760

Schedule Authorized by State Archivist

Date

Signature

INSTRUCTIONS - TYPE OR PRINT A SEPARATE FORM FOR EACH NEW
REVISED RECORD SERIES. FORWARD WITH RECORDS RETENTION
SCHEDULE (DGS 550-1)

DEPARTMENT OF GENERAL SERVICES
RECORDS MANAGEMENT DIVISION
7275 WATERLOO ROAD
P.O. BOX 275 - JESSUP, MARYLAND 20794

AGENCY RECORDS INVENTORY

Page _____ Of _____

DEPARTMENT/AGENCY
Dept. of Health and Mental
Hygiene

2. DIVISION
Division of Medical
Assistance Recoveries

3. UNIT

DEFINITION - Records Series - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.

4. RECORD SERIES TITLE

Files of former employees of the Medical Assistance
Recoveries Unit.

5. EARLIEST YEAR / LATEST YEAR

_____ TO _____

6. RECORD SERIES DESCRIPTION (Briefly describe the types of information/documents/forms found in the Series Include the purpose or function of the Series)
Files include work history for the duration of employment within the Medical Assistance Recoveries Unit. Contents would include effective starting date, annual evaluations, disciplinary actions, reclassifications, sick leave documentation, and any other miscellaneous filing.

7. RECORD SERIES FORMAT(S)

- ☒ Letter Size ☐ Microfilm
☐ Legal Size ☐ Computer Tape
☐ Bound Book ☐ Floppy Disk
☐ Audio Tape ☐ Video Tape
☐ Other (Specify) _____

8. RECORD SERIES SEQUENCE

- ☒ Alphabetical
☐ Numerical
☐ Chronological
☐ Geographical
☐ Other (Specify) _____

9. VOLUME

- ☒ File Drawer(s)
☐ Microfilm Reel(s)
☐ Computer Tape(s)
☐ Other (Specify) _____

1
Number

10. ANNUAL ACCUMULATION

- ☒ File Drawer(s)
☐ Microfilm Reel(s)
☐ Computer Tape(s)
☐ Other (Specify) _____

1
Number

11. FILE IS USED

- ☐ Daily ☐ Weekly ☒ Monthly

12. FILE BECOMES INACTIVE AFTER

4
Number

- ☐ Month(s) ☒ Year(s)

13. CURRENT LOCATION(S) (Bldg., Floor, Room)
201 W. Preston St.
Second Floor, Room 203

14. IS RECORD SERIES DUPLICATED ELSEWHERE? (If yes, specify agency or office)

☒ Yes DHMH Personnel

☐ No

15. ACCESS RESTRICTIONS (If yes, cite law(s) & regulation(s))

- ☐ Yes _____ ☒ No

16. AUDIT REQUIREMENTS

- ☒ None ☐ State ☐ Federal ☐ Independent

17. IS AN INDEX SYSTEM USED? (If yes, explain briefly and describe any hardware/software)

- ☐ Yes _____ ☒ No

18. RECOMMENDED RETENTION

Retain in office for two (2) years, then transfer to the
State Records Center for four (4) years and destroy.

19. NAME AND TITLE OF PREPARER

Greta E. Rolland, Chief

20. TELEPHONE NUMBER
410-225-1760

21. DATE

May 4, 1994

INSTRUCTIONS - TYPE OR PRINT A SEPARATE FORM FOR EACH NEW
REVISED RECORD SERIES. FORWARD WITH RECORDS RETENTION
SCHEDULE (DGS 550-1)

DEPARTMENT OF GENERAL SERVICES
RECORDS MANAGEMENT DIVISION
7275 WATERLOO ROAD
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AGENCY RECORDS INVENTORY

Page _____ Of _____

1. DEPARTMENT/AGENCY

Dept. of Health and Mental
Hygiene

2. DIVISION

Division of Medical
Assistance Recoveries

3. UNIT

DEFINITION - Records Series - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.

4. RECORD SERIES TITLE

Timesheets

5. EARLIEST YEAR / LATEST YEAR

_____ TO _____

6. RECORD SERIES DESCRIPTION (Briefly describe the types of information/documents/forms found in the Series Include the purpose or function of the Series)

Folders include copies of bi-weekly timesheets.

7. RECORD SERIES FORMAT(S)

- ☒ Letter Size ☐ Microfilm
☐ Legal Size ☐ Computer Tape
☐ Bound Book ☐ Floppy Disk
☐ Audio Tape ☐ Video Tape
☐ Other (Specify) _____

8. RECORD SERIES SEQUENCE

- ☐ Alphabetical
☒ Numerical
☐ Chronological
☐ Geographical
☐ Other (Specify) _____

9. VOLUME

- ☒ File Drawer(s)
☐ Microfilm Reel(s)
☐ Computer Tape(s)
☐ Other (Specify) _____

1
Number

10. ANNUAL ACCUMULATION

- ☒ File Drawer(s)
☐ Microfilm Reel(s)
☐ Computer Tape(s)
☐ Other (Specify) _____

1
Number

11. FILE IS USED

- ☐ Daily ☒ Weekly ☐ Monthly

12. FILE BECOMES INACTIVE AFTER

4
Number

- ☐ Month(s) ☒ Year(s)

13. CURRENT LOCATION(S) (Bldg., Floor, Room)
201 W. Preston St.
Second Floor, Room 203

14. IS RECORD SERIES DUPLICATED ELSEWHERE? (If yes, specify agency or office)

- ☒ Yes DHMH Personnel ☐ No

15. ACCESS RESTRICTIONS (If yes, cite law(s) & regulation(s))

- ☐ Yes _____ ☒ No

16. AUDIT REQUIREMENTS

- ☐ None ☒ State ☐ Federal ☐ Independent

17. IS AN INDEX SYSTEM USED? (If yes, explain briefly and describe any hardware/software)

- ☐ Yes _____ ☒ No

18. RECOMMENDED RETENTION

Retain in office for two (2) years, then transfer to the
State Records Center for four (4) years and destroy.

19. NAME AND TITLE OF PREPARER

Greta E. Rolland

20. TELEPHONE NUMBER

410-225-1760

21. DATE

May 4, 1994

INSTRUCTIONS - TYPE OR PRINT A SEPARATE FORM FOR EACH NEW
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Page _____ Of _____

1. DEPARTMENT/AGENCY
Dept. of Health and Mental Hygiene

2. DIVISION
Division of Medical
Assistance Recoveries

3. UNIT

DEFINITION - Records Series - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.

4. RECORD SERIES TITLE

Chronological files of the activities of the Division of
Medical Assistance Recoveries

5. EARLIEST YEAR / LATEST YEAR

_____ TO _____

6. RECORD SERIES DESCRIPTION (Briefly describe the types of information/documents/forms found in the Series Include the purpose or function of the Series)
Files include documentation of the work performed in the case areas of the three
sections comprising DMAR.

7. RECORD SERIES FORMAT(S)

- ☒ Letter Size ☐ Microfilm
☐ Legal Size ☐ Computer Tape
☐ Bound Book ☐ Floppy Disk
☐ Audio Tape ☐ Video Tape
☐ Other (Specify) _____

8. RECORD SERIES SEQUENCE

- ☒ Alphabetical
☐ Numerical
☐ Chronological
☐ Geographical
☐ Other (Specify) _____

9. VOLUME

- ☒ File Drawer(s)
☐ Microfilm Reel (s)
☐ Computer Tape (s)
☐ Other (Specify) _____

1

Number

10. ANNUAL ACCUMULATION

- ☒ File Drawer (s)
☐ Microfilm Reel (s)
☐ Computer Tape(s)
☐ Other (Specify) _____

1

Number

11. FILE IS USED

- ☐ Daily ☐ Weekly ☒ Monthly

12. FILE BECOMES INACTIVE AFTER

4

Number

- ☐ Month(s) ☒ Year(s)

13. CURRENT LOCATION(S) (Bldg., Floor, Room)
201 West Preston Street
Second Floor, Room 203

14. IS RECORD SERIES DUPLICATED ELSEWHERE? (If yes, specify agency or office)
☒ Yes DHMH Personnel ☐ No

15. ACCESS RESTRICTIONS (If yes, cite law(s) & regulation(s))

- ☐ Yes _____ ☒ No

16. AUDIT REQUIREMENTS

- ☒ None ☐ State Federal ☐ Independent

17. IS AN INDEX SYSTEM USED? (If yes, explain briefly and
describe any hardware/software)

- ☐ Yes _____ ☒ No

18. RECOMMENDED RETENTION

Retain in office for five years, then transfer to the
State Records Center for four years and destroy.

19. NAME AND TITLE OF PREPARER

Greta E. Rolland, Chief

20. TELEPHONE NUMBER

410-225-1760

21. DATE

May 4, 1994

INSTRUCTIONS - TYPE OR PRINT A SEPARATE FORM FOR EACH NEW
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7775 WATERLOO ROAD
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Page _____ Of _____

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Dept. of Health and Mental Hygiene

2. DIVISION
Division of Medical
Assistance Recoveries

3. UNIT

DEFINITION - Records Series - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.

4. RECORD SERIES TITLE

Health Management Systems Contract

5. EARLIEST YEAR / LATEST YEAR
_____ TO _____

6. RECORD SERIES DESCRIPTION (Briefly describe the types of information/documents/forms found in the Series. Include the purpose or function of the Series)
Files include activities of the TPL Contractor, Health Management Systems, Inc.

7. RECORD SERIES FORMAT(S)

- ☒ Letter Size ☐ Microfilm
☐ Legal Size ☐ Computer Tape
☐ Bound Book ☐ Floppy Disk
☐ Audio Tape ☐ Video Tape
☐ Other (Specify) _____

8. RECORD SERIES SEQUENCE

- ☒ Alphabetical
☐ Numerical
☐ Chronological
☐ Geographical
☐ Other (Specify) _____

9. VOLUME

- ☒ File Drawer(s)
☐ Microfilm Reel(s)
☐ Computer Tape(s)
☐ Other (Specify) _____

1

Number

10. ANNUAL ACCUMULATION

- ☒ File Drawer(s)
☐ Microfilm Reel(s)
☐ Computer Tape(s)
☐ Other (Specify) _____

1

Number

11. FILE IS USED

- ☐ Daily ☐ Weekly ☒ Monthly

12. FILE BECOMES INACTIVE AFTER

5

Number

- ☐ Month(s) ☒ Year(s)

13. CURRENT LOCATION(S) (Bldg., Floor, Room)
201 West Preston Street
Second Floor, Room 203

14. IS RECORD SERIES DUPLICATED ELSEWHERE? (If yes, specify agency or office)
☒ Yes DHMH Personnel ☐ No

15. ACCESS RESTRICTIONS (If yes, cite law(s) & regulation(s))

- ☐ Yes _____ ☒ No

16. AUDIT REQUIREMENTS

- ☒ None ☐ State Federal ☐ Independent

17. IS AN INDEX SYSTEM USED? (If yes, explain briefly and describe any hardware/software)

- ☐ Yes _____ ☒ No

18. RECOMMENDED RETENTION

Retain in office for 6 months after contract terminates, then transfer to State Records Center for five years and destroy.

19. NAME AND TITLE OF PREPARER
Greta E. Rolland, Chief

20. TELEPHONE NUMBER
410-225-1760

21. DATE
May 4, 1994

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2. DIVISION
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3. UNIT

DEFINITION - Records Series - A group of related records normally filed and used as a unit for reference as well as retention and disposition purposes.

4. RECORD SERIES TITLE
Miscellaneous

5. EARLIEST YEAR / LATEST YEAR
_____ TO _____

6. RECORD SERIES DESCRIPTION (Briefly describe the types of information/documents/forms found in the Series. Include the purpose or function of the Series)
Consists of anything not mentioned or described in items one through four above.

7. RECORD SERIES FORMAT(S)

- ☒ Letter Size ☐ Microfilm
☐ Legal Size ☐ Computer Tape
☐ Bound Book ☐ Floppy Disk
☐ Audio Tape ☐ Video Tape
☐ Other (Specify) _____

8. RECORD SERIES SEQUENCE

- ☒ Alphabetical
☐ Numeral
☐ Chronological
☐ Geographical
☐ Other (Specify) _____

9. VOLUME

- ☒ File Drawer(s)
☐ Microfilm Reel (s)
☐ Computer Tape (s)
☐ Other (Specify) _____

1
Number

10. ANNUAL ACCUMULATION

- ☒ File Drawer (s)
☐ Microfilm Reel (s)
☐ Computer Tape(s)
☐ Other (Specify) _____

1
Number

11. FILE IS USED

- ☐ Daily ☒ Weekly ☐ Monthly

12. FILE BECOMES INACTIVE AFTER

4
Number

- ☐ Month(s) ☒ Year(s)

13. CURRENT LOCATION(S) (Bldg., Floor, Room)
201 W. Preston Street
Second Floor, Room 203

14. IS RECORD SERIES DUPLICATED ELSEWHERE? (If yes, specify agency or office)
☐ Yes _____ ☒ No

15. ACCESS RESTRICTIONS (If yes, cite law(s) & regulation(s))

- ☐ Yes _____ ☒ No

16. AUDIT REQUIREMENTS

- ☒ None ☐ State ☒ Federal ☐ Independent

17. IS AN INDEX SYSTEM USED? (If yes, explain briefly and describe any hardware/software)

- ☐ Yes _____ ☒ No

18. RECOMMENDED RETENTION

Retain in office for two (2) years, then transfer to the
State Records Center for four (4) years and destroy

19. NAME AND TITLE OF PREPARER

Greta E. Rolland, Chief

20. TELEPHONE NUMBER

410-225-1760

21. DATE

May 4, 1994